## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where in

appropriate. All further indicated unless correcte maintenance fee notifical	ed below or directed oth	g the Patent, advance or crosse in Block 1, by (a	i) specifying a new corres	boundance somess? an	be mailed to the current end/or (b) indicating a separ	are TEL ADDRESS TO	
CURRENT COURESPONDENCE ADDRESS (Nove: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing; must have its own certificate of mailing or transmission.			
	7590 69/17	/2009		Certifi	cate of Mailing or Trunsm	ilision	
HEWLETT-PACKARD COMPANY Intellectual Property Administration P.O. Box 272400				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Fort Collins, CO 80527-2400				Debbie Syrmis (Depositors name)			
10/16/2009 SSANDA	R1 00000009 08202	25 09903075	••••	Deploy.	Syrmis	(Signarure)	
01 FC:1501 1510.00 DA			L	10/15/09		(Dale)	
APPLICATION NO.	300. VO FILING DATE		FIRST NAMED INVENTOR	A	TTORNEY DOCKET NO.	CONFIRMATION NO.	
09/903,075	97/10/2001		Kemal Guler		10014768	9384	
	METHOD AND SYST	EM FOR SELECTING A	AN OPTIMAL AUCTION	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATEDUE	
APPLN, TYPE			\$300	\$0	\$1810	12/17/2009	
nonprovisional EXAM	NO	\$1510 ARTUNIT	CLASS-SUBCLASS	]	22010	. Car C Canada	
CHANDLER, SARA M		3693	705-937000	J.			
			2. For printing on the p	stent from nage list		······································	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication for "Fee Address" Indication form PTO/SB/47; Rev 03-02, or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
J. ASSIGNEE NAME A PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	less an assigned is ident th in 37 CFR 3.11. Com	A TO BE PRINTED ON ified below, no assignee pletion of this form is NO	THE PATENT (print or ty) data will appear on the p IT a substitute for filing an (B) RESIDENCE: (CITY	atent. If an assignee assignment.	is identified below, the do	cument has been filled for	
Hewlett-Packard Development Company, L.P. Houston, Texas							
Please check the appropr	nate assignee category o	categories (will not be p	rinted on the patent)	Individual 🖾 Corp	oration or other private gro	up entity Government	
4a. The following fee(s) are submitted:  Si Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			<ul> <li>5. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown shove)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fcc(s), any deficiency, or credit any overpayment, to Deposit Account Number 68, 2022. (cnclose an extra copy of this form).</li> </ul>				
5. Change in Entity Sta	itus (from status indicate	d above)			ENTITY status. See 37 CF		
NOTE: The Issue Fee ar	nd Publication Fee (if records of the United St	nired) will not be accepted			ered attorney or agent; or the		
			*****				
Authorized Signature / Ted McCullough/ Typed or printed name Ted McCullough				Registration No.	0/15/09 56,231		
This collection of inform an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, Virginia 27	nation is required by 37 ( strainly is governed by 3; d application form to the ions for reducing this be virginia 22313-1450. De 313-1450.	FR 1.311. The information of C.S.C. 122 and 37 CFR by USPTO. Time will variete, should be sent to if D NOT SEND FEES OR	on is required to obtain or 1.14. This collection is es y depending upon the indi- ic Chief Information Offic COMPLETED FORMS T	retain a benefit by the limated to take 12 min ridual case. Any com- er, U.S. Patent and Tr O THIS ADDRESS.	public which is to file (and nutes to complete, including ments on the amount of tin ademark Office, U.S. Depa SEND TO: Commissioner f uplays a valid OMB control.	by the USPTO to process g gathering, preparing, and ne you require to complete rument of Commerce, P.O. for Patents, P.O. Box 1450	

OMB 0651-0033